

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO 10635170
APPLICANT(S)

FLING DATE 08-06-03

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2	/					
3		/				
4		2				
5		2				
6		2				
7	/					
8		/				
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46		/				
47		/				
48		/				
49		/				
50		/				
TOTAL IND.	←		←		←	
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

51		/				
52		/				
53		/				
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97						
98						
99						
100						
TOTAL IND.	4		←		←	
TOTAL DEP.	52		←		←	
TOTAL CLAIMS	56					